

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

161718866

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>11/4/98</u>		2 Serial/Patent # <u>4682857</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input type="checkbox"/>	Filing		\$
<input type="checkbox"/>	Amendment		\$
<input type="checkbox"/>	Extension of Time		\$
<input type="checkbox"/>	Notice of Appeal/Appeal		\$
<input type="checkbox"/>	Petition		\$
<input type="checkbox"/>	Issue		\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$
<input checked="" type="checkbox"/>	Maintenance <u>Surcharge</u>	<u>10</u>	<u>7-28-97</u> \$ <u>1540.00</u> <del>1490</del>
<input type="checkbox"/>	Assignment		\$
<input type="checkbox"/>	Other		\$
		7 TOTAL AMOUNT OF REFUND	
		<div style="text-align: right;"> <u>1540.00</u>            \$ <u>1490</u> </div>	
10 REASON:		8 TO BE REFUNDED BY:	
<input type="checkbox"/>	Overpayment	<input type="checkbox"/> Treasury Check	
<input type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:	
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	<div style="border: 1px solid black; padding: 2px; display: inline-block;">             04--0822           </div>	
<u>Surcharge not necessary.</u>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Karen Creasy</u>		TITLE: <u>Petitions Exam</u>	
SIGNATURE: <u>Karen Creasy</u>		PHONE: <u>305-8859</u>	
OFFICE: <u>DAC for Patents</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>Patrice Bond</u>		DATE: <u>11/13/98</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: